PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10729735

CLAIMS AS FILED - PART I						SMALL ENTITY		NTITY			THAN		
TOTAL CLAIMS			(Column 1)		(Column 2)		1	TYPE		OR 7		L ENTITY	
500			<u> </u>					RATE	FEE	-	RATE	FEE	
FOR			NUMBER FILED		NUME	BER EXTRA		BASIC FEI	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			2 9 minus 20=		• 9			X\$ 9=		OR	X\$18=	162	
INDEPENDENT CLAIMS			9 minus 3 =			6		X43≃		OR	X86=	510	
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=	275	
* If the difference in column 1 is less than zero, enter					"0" in c	column 2	į	TOTAL		OR	TOTAL	1447	
of _ CLAIMS AS AMENDED - PART II											OTHER	THAN	
XBS/BS (Column 1) (Column 2) (Column 3								SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	.28	Minus	3	20	=	11	X\$ 9=		OR	X\$18=		
	Independent	* O	Minus	***	CLAIN	<u> -</u>		X43=		OR	X86=		
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						' [+145=		OR	+290=		
1,619,12,15,16,17,18,19,							L	TOTAL ODIT. FEE		OR	FOTAL ADDIT. FEE		
		(Column 1)		(Colum	n 2)	(Column 3)			ı				
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		ŔATE	ADDI- TIONAL FEE	
	Total	*	Minus	** .	,	=		X\$ 9=		OR	·X\$18=		
	Independent	*	Minus	###		=	!	X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									ОП			
							L	+145=		OR	+290=		
		•					·A	TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE		
		(Column 1)		(Colum	n 2)	(Column 3)							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	_	HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	٠.	= .		X\$ 9=		OR	X\$18=		
	Independent	.*	Minus	***		=	╽┟	X43=			X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	700-		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.													
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." Apply 555										TOTAL ODIT. FEE			
i	***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												